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Application:	10/60388	Examiner : 2	NIEZEK	GAU:	2651	
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class multin an envelope addressed to the Mail Stop ISSUE FEE address above, or being ficesimile transmissed to the USPTO (703) 746-4000, on the date indicated below. David K. Lucente Scagate Technology LLC Intellectual Property - COL2LGL 389 Disc Drive Longmont, CO 80503 Zeina Smith ocho/s som May 2 21 Recore (£) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 06/25/2003 10/603.885 Michael Edward Baum TITLE OF INVENTION: RADIAL DEPENDENT LOW PREQUENCY REPEATABLE RUN OUT COMPENSATION APPARATUS AND METHOD APPLN. TYPE SMALL ENTITY ISSUE FEE **FUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE lacoiaivorquea NO \$1400 2300 \$1700 07/26/2005 EXAMINER ART UNIT CLASS-SUBCLASS SNIEZEK, ANDREW L 2651 360-077040 Change of correspondence address or indication of "Fee Address" (37 FR 1.363). 2. For printing on the patent front page, firt David K. Lucente (1) the names of up to 3 registered putent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2 Derek J. Berger (2) the name of a single farm (baving as a member a registered attempt or agent) and the names of up to 2 registered polent attempts or agents. If no name is listed, so name will be printed. Toe Address" indication (or "Foe Address" Indication form PTO/SB/47; Rev 03-02 or more recess) attached. Use of a Cost Number is required.). ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignme is identified below, no easignme data will appear on the patent. If an assignme is identified below, the document has been filled for meconistion as set feeth in 37 CFR 3.11. Completion of thus form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Seagate Technology LLC Scotts Valley, California Please check the appropriate easignes easignly or easigncies (will not be printed on the pasent) : 🚨 individual 🚨 Corporation or other private group easity 🚨 Government da. The following foc(s) ere enclosed: 4b. Payment of Fee(s): lame Fee A check in the amount of the for(s) is enclosed. Dubtication Fee (No small entity discount permitted) Payment by credit curl. Form PTO-2038 is attached. The Director is hereby appropried by charge the required feo(s), or credit any overpayment, to Deposit Account Number 19-1038 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change to Eatity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the lastic Fee and Publication Fee (if any) or to to-apply any previously gold issue fee to the application identified above.

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